STATE OF NEW HAMPSHIRE

for LOBBYISTS

RECEIVED

JAN 30 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

2018 Statement of Income and Expenses (RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) George W. Roussos and Lindsay E. Nadeau

ne of lobbyist's partnersh	iip, firm or corporation, if s	any:	
& Reno P.A			
(Name of partner	ship, firm or corporation)	₹ ₹	
Main Street PO Ro	v 3550 Concord	NH	03302
	(Town/City)	(State)	(Zip Code)
			•
			@orr-reno.com
(Telephone)	(rax		
	•	•	y file a separate report for
reportable transactions occ	curring in the months prior to	the reporting date relative to the	e following client:
ew Hampshire Associ	ation of Domestic Insur	ance Companies	
			
•	••	,	
	the lobbyist (including the lo	bbyist's family), or the lobbying	firm listed below which are
te of Report April 25,	2018 🗆	July 25, 2018 🛚	
cover: activity from date	of registration to 3/31/18	activity from 4/1/18 to 6/30/18	
	= -	January 30, 2019 🔀 activity from 10/1/18 to 12/31/	118
ox is checked, complete ju			
eck if additional reports :	are attached:		
•		file Addendum A- Fees and Ex	rpenses
you have paid an honorariu			
you, your firm, or your fam	ily has made political contrib	putions, you must file Addendu	m C- Political Contributions
read RSA 15, RSA 15-B, F	RSA 14-C and RSA 664 and I	hereby swear or affirm that the f	
	Reno, P.A. (Name of partners) Main Street, P.O. Bost Address: (Street) 224-2381 (Telephone) is statement covers: (Choable expense transactions occurrently formations of the statement of th	(Name of partnership, firm or corporation) Main Street, P.O. Box 3550 Concord (Town/City) 224-2381 (603) 224-2318 (Telephone) (Faxistatement covers: (Choose one – file separate reposable expense transactions which are not attributable reportable transactions occurring in the months prior to few Hampshire Association of Domestic Insura (Full Name of Client as it appears on the Loreportable transactions by the lobbyist (including the loted to any particular client. The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.) The of Report April 25, 2018 (Including the loted to any particular client.)	(Name of partnership, firm or corporation) Main Street, P.O. Box 3550 Concord NH s Address: (Street) (Town/City) (State) 224-2381 (603) 224-2318 e-mail groussos (Telephone) (Fax) is statement covers: (Choose one – file separate reports for each client, OR you may able expense transactions which are not attributable to any one client). reportable transactions occurring in the months prior to the reporting date relative to the few Hampshire Association of Domestic Insurance Companies (Full Name of Client as it appears on the Lobbyist Registration Form) reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying ed to any particular client. te of Report April 25, 2018 October 31, 2018 October 31, 2018 October 31, 2018 Activity from 4/1/18 to 6/30/18 October 31, 2018 Activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18 ere have been no fees received and no reportable transactions made since the load is checked, complete just this form and submit it to the Secretary of State's Office, State, NH 03301. eck if additional reports are attached: you have received fees or made expenditures, you must file Addendum A—Fees and Exponent and paid an honorarium or reimbursed expenses, you must file Addendum B—Rejee Reimbursement you, your firm, or your family has made political contributions, you must file Addendum Statement/Affirmation by Lobbyist read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the free and RSA 15 and RSA 15 and RSA 15 and R

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyssi(s) George W. Roussos and Lindsay E. Nadeal	ñ
II. Name of lobbyist's partnership, firm or corporation, if any:	
Orr & Reno, P.A. (Name of partnership, firm or corporation)	
III. Name of Client NH Association of Domestic Insurance Compan	ies Date 1/30/19
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a)s 7,000.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 110,740.93
c) Total of all fees received to date (Add lines a and b)	0) \$ 117,748.93
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) s 22,329.43
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses pair penses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; than \$10 that is given to the person d with a value of \$25.00 or less); and tring period of greater than \$25.00 for the of greater than \$25, purchase of r than \$25, but not greater than \$50 expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	00.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	ь)\$0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	ns
V1. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this report
Paid to:	Amount:
	\$
	\$
	s
	\$
	\$
	\$
•	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affiring is true and complete to the best of my knowledge and belief.	rm that the foregoing inform
/m W/m	1/30/19
(Signature of lobbyist)	(Date)

.

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Orr & Reno, P.A.
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): New Hampshire Association of Domestic Insurance Companies
Date of Report (check one):
April 25, 2018 □ July 25, 2018 □ October 31, 2018 □ January 30, 2019 □
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Mathematical Mathem
George W. Roussos
(Print Name of Johnvist)